



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

GREENFIELD, MASS

14 JUN -9 PM 4:03

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: March 29, 2014 Beginning Date: March 29, 2014 Ending Date: May 29, 2014

Type of Report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Candidate Full Name (if applicable)

Ronald R. Weaver

Office Sought and District

Town Council - Pct #2

Residential Address

Telephone Number (optional): 32 Rockland Rd - Gtfd

Committee Name

Committee To Meet Ron Weaver

Name of Committee Treasurer

Barbara Weaver

Committee Mailing Address

Telephone Number (optional): 32 Rockland Rd - Gtfd

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 2, line 11)

1,377.17

Line 3: Subtotal (line 1 plus line 2)

1,377.17

Line 4: Total expenditures this period (page 3, line 14)

1,207.05

Line 5: Ending Balance (line 3 minus line 4)

170.12

Line 6: Total in-kind contributions this period (page 4)

165.16

Line 7: Total (all) outstanding liabilities (page 4)

297.24

Line 8: Name of bank(s) used:

Citizen's Bank (Gtfd)

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Barbara Weaver (Treasurer's signature)

Date: June 8, 2014

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature)

Date: 6/8/14

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/3/14	Ronald Weaver 32 Rockland Rd - Gtld	* 25.-	
3/4/14	Barbara Weaver 32 Rockland Rd - Gtld	* 1.17	
3/4/14	Ronald Weaver 32 Rockland Rd - Gtld	* 9.-	
3/4/14	Barbara Weaver 32 Rockland Rd - Gtld	* 12.-	
3/12/14	Yogesh Malik 33 Grove St - Gtld	\$ 200.-	Banker - Citizen's Bank (Gtld)
3/14/14	Becky George - FMC FMC - 164 High	20.-	
3/19/14	Alvin Yap 105 Cottage St - Gtld	20.-	
3/19/14	Tiffany Xie 832 Marconi St, Montebello, CA	100.-	
3/19/14	Alex Do 105 Cottage St - Gtld	20.-	
3/19/14	Rachel Ung Smith St - Gtld	20.-	
3/19/14	Lillian Do 105 Cottage St - Gtld	500.-	Owner - New Fortune Restaurant 249 Mahanick Tr. - Gtld
4/10/14	Ronald Weaver 32 Rockland Rd - Gtld	125.-	
5/4/14	Jen + David Tan 115 Bungalow Ave - Gtld	100.-	
Line 9: Total Receipts over \$50 (or listed above)		1157.17	
Line 10: Total Receipts \$50 and under* (not listed above)		\$ 225.-	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,377.17	← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
3/3/14	Go Daddy		Domain Name	1.17
3/3/14	Go Daddy		Website Builder	12. —
3/4/14	Town Clerk - Greenfield	Town Hall - Gnfd	mailing list - Pet #2	9. —
3/14/14	55 Printing (online)		to print Part Cards #1	92.57
3/24/14	Go Daddy		Website Builder	1. —
3/31/14	Signs-on-the- cheap		Yard Signs + Brackets	226.08
4/3/14	Discount Mugs		Flashdrivers (imprinted)	396.49
4/4/14	Stapler	Mohawk Trail - Gnfd	Business Cards	56.43
4/9/14	Adams Direct Mail	Elm St Gnfd	mailing #1	282.59
4/23/14	Go Daddy		Site Builder	5.99
5/10/14	Stapler	Mohawk Trail Gnfd	Print Part Card #2	123.73
Line 12: Total Expenditures over \$50 (or listed above)				\$1,207.05
Line 13: Total Expenditures \$50 and under* (not listed above)				
Line 14: TOTAL EXPENDITURES IN THE PERIOD				1,207.05

Enter on page 1, line 4 →

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
3/10/14	Rick Roy		photo shoot	\$25
4/3/14	Eric Do	105 Cottage Ave Gutted	flash drives	\$140.16

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Line 15: In-Kind Contributions over \$50 (or listed above)	
Line 16: In-Kind Contributions \$50 & under (not listed above)	
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS	\$165.16

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
5/30/14	Adams Direct Mail	99 Elm St Gutted	mail Post Card #2	\$297.24

Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	\$297.24
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Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwealth
of Massachusetts

14 JUN -9 AM 9:18

File with: City or Town Clerk or Election Commissioner

Fill in Reporting Period dates:

Beginning Date:

3/13/14

Ending Date:

4/7/14

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

Robert E. Wainstein

Candidate Full Name (if applicable)

Town Council

Office Sought and District

28 James St Greenfield, MA 01301

Residential Address

Telephone Number (optional):

413-772-2222

Rob in 5

Committee Name

SARA Jane MOSS

Name of Committee Treasurer

28 James St Greenfield, MA 01301

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

NA

Line 2: Total receipts this period (page 2, line 11)

\$ 545

Line 3: Subtotal (line 1 plus line 2)

\$ 545

Line 4: Total expenditures this period (page 3, line 14)

\$ 188.15

Line 5: Ending Balance (line 3 minus line 4)

\$ 356.85

Line 6: Total in-kind contributions this period (page 4)

0

Line 7: Total (all) outstanding liabilities (page 4)

0

Line 8: Name of bank(s) used:

Greenfield Savings Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Treasurer's signature)

Date:

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

R Wainstein

(Candidate's signature)

Date: 4/7/14

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/23/14	Ed Beelin 20 Orchard St Greenfield, MA 01301	\$100.00	
3/17/14	Marilyn Clayton 8 Perbody Lane Greenfield MA	\$100.00	
3/25/14	Ira Mitchell 621 Bernardston Rd Greenfield, MA	\$100.00	
Line 9: Total Receipts over \$50 (or listed above)		\$300.00	
Line 10: Total Receipts \$50 and under* (not listed above)		\$245.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$545.00	← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Line 15: In-Kind Contributions over \$50 (or listed above)	
Line 16: In-Kind Contributions \$50 & under (not listed above)	
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS	

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount

Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	
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Commonwealth
of Massachusetts

Form CFF-102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

GREENFIELD, MASS.

14 AUG -4 AM 8:53

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

March 29 2014

Ending Date:

May 27 2014

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Hillary Heather Hoffman

Candidate Full Name (if applicable)

Town Council, Precinct 6, Greenfield

Office Sought and District

30 Abbott Street, Greenfield, MA 01301

Residential Address

Telephone Number (optional):

Committee to Elect Hillary Hoffman

Committee Name

Iris Vicencio-Rasku

Name of Committee Treasurer

50 Conway Street, Greenfield, MA 01301

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

-526.13

Line 2: Total receipts this period (page 3, line 11)

473.00

Line 3: Subtotal (line 1 plus line 2)

-53.13

Line 4: Total expenditures this period (page 5, line 14)

84.86

Line 5: Ending Balance (line 3 minus line 4)

-137.99

Line 6: Total in-kind contributions this period (page 6)

Line 7: Total (all) outstanding liabilities (page 7)

Line 8: Name of bank(s) used: Greenfield Savings Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Treasurer's signature)

Date:

8-1-14

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Candidate's signature)

Date:

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/6/14	Garrett Connelly, 84 Congress Street, Greenfield MA 01301	50.00	
5/8/14	Hampshire-Franklin Labor Council, PO Box 925 Northampton, MA 01060	100.00	
5/1/14	MNA PAC, 340 Turnpike St, Canton, MA 02021	100.00	
Line 9: Total Receipts over \$50 (or listed above)		250.00	
Line 10: Total Receipts \$50 and under* (not listed above)		223.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		473.00	← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	0
			Line 16: In-kind \$50 and under	0
			Line 17: Total In-kind	0

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	0

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.



printed on recycled paper



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

GREENFIELD, MASS

14 JUN 16 AM 9:52

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: March 29, 2014 Ending Date: May 27, 2014

Type of Report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Steven Ronkave
Candidate Full Name (if applicable)
Ward 4 Town Councilor
Office Sought and District
206 High St Greenfield MA
Residential Address
Telephone Number (optional): 413-774-3039

Committee Name
Name of Committee Treasurer
Committee Mailing Address
Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report 0
Line 2: Total receipts this period (page 2, line 11) 43.03
Line 3: Subtotal (line 1 plus line 2) 43.03
Line 4: Total expenditures this period (page 3, line 14) 43.03
Line 5: Ending Balance (line 3 minus line 4) 43.03
Line 6: Total in-kind contributions this period (page 4) 0
Line 7: Total (all) outstanding liabilities (page 4) 0
Line 8: Name of bank(s) used: None

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Treasurer's signature) Date: _____

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Steven Ronkave (Candidate's signature) Date: 6-16-2014

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

[illegible]

Line 9: Total Receipts over \$50 (or listed above)

Line 10: Total Receipts \$50 and under* (not listed above)

Line 11: TOTAL RECEIPTS IN THE PERIOD

← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Enter on page 1, line 6 →

Line 15: In-Kind Contributions over \$50 (or listed above)

Line 16: In-Kind Contributions \$50 & under (not listed above)

Line 17: TOTAL IN-KIND CONTRIBUTIONS

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

*Done June 2nd

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

March 29, 2014

Ending Date:

May 27, 2014

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

Robert E. Wasko

Candidate Full Name (if applicable)

Town Council

Office Sought and District

28 James St, Greenfield, MA

Residential Address

Telephone Number (optional):

Rob in 5

Committee Name

Sara Jane Moss

Name of Committee Treasurer

50 Highland Ave Greenfield, MA

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

\$306.85 (\$50.00 check bounced)

Line 2: Total receipts this period (page 2, line 11)

\$470.00

Line 3: Subtotal (line 1 plus line 2)

\$776.85

Line 4: Total expenditures this period (page 3, line 14)

\$522.25

Line 5: Ending Balance (line 3 minus line 4)

\$254.60

Line 6: Total in-kind contributions this period (page 4)

0

Line 7: Total (all) outstanding liabilities (page 4)

0

Line 8: Name of bank(s) used:

Greenfield Savings Bk

14 JUN 30 AM 10:33
OFFICE OF THE
TOWN CLERK

GREENFIELD, MASS.

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

(Treasurer's signature)

Date:

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

R. S. L.

(Candidate's signature)

Date: 6/27/14

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/14/14	Diane Esser 15 Chestnut Hill Greenfield, MA	\$100.00	
5/10/14	DAVID Singer 377 MAIN ST Greenfield, MA	\$150.00	
5/20/14	HOWARD WAYNE TAPPAN ST BROOKLINE, MA	\$100.00	
Line 9: Total Receipts over \$50 (or listed above)		\$350.00	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		\$120.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$470.00	

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/8/14	Rab W Ainstein	28 Sames ST Greenfield, MA	Reimburse For FLIERS / COPY CAT PRINTING	\$164.69
5/3/14	Ros Wainstein	28 Sames ST Greenfield, MA	Reimburse for Stickers / STAPLES	\$111.56
5/16/14	Ros Wainstein	28 Sames ST greenfield, MA	Reimburse For Lawn signs/ CAPTOL Promotions.com	\$276.00
		Line 12: Total Expenditures over \$50 (or listed above)		
		Line 13: Total Expenditures \$50 and under* (not listed above)		
Enter on page 1, line 4 →		Line 14: TOTAL EXPENDITURES IN THE PERIOD		

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Line 15: In-Kind Contributions over \$50 (or listed above)	
Line 16: In-Kind Contributions \$50 & under (not listed above)	
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS	

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount

Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	
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Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

GREENFIELD, MASS

14 JUN -9 PM 1:09

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 3/29/14 Ending Date: 5/27/14

Type of Report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Penny R Rickels
Candidate Full Name (if applicable)

Precinct 5 Councilor
Office Sought and District

497 Main Street
Residential Address

Telephone Number (optional): 413 636 4915

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Telephone Number (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report 0

Line 2: Total receipts this period (page 2, line 11) 2015.00

Line 3: Subtotal (line 1 plus line 2) 2015.00

Line 4: Total expenditures this period (page 3, line 14) 186.89

Line 5: Ending Balance (line 3 minus line 4) 1828.11

Line 6: Total in-kind contributions this period (page 4) -0-

Line 7: Total (all) outstanding liabilities (page 4)

Line 8: Name of bank(s) used: Greenfield Savings Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Janeane Rickels (Treasurer's signature) Date: 6/2/14

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Penny Rickels (Candidate's signature) Date: 6/2/14

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/8	Theresa2 Conti 46 Fresh King Hwy	100.00	
5/8	Daniel Lucey 11 Crescent Street	100.00	
5/8	Sandra & Peter Ruggeri 54 School St	150.00	
5/8	Patrice & Mark Leonard 63 Orchard St	100.00	
Line 9: Total Receipts over \$50 (or listed above)		450.00	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		1565.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		2015.00	

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Enter on page 1, line 6 →	Line 15: In-Kind Contributions over \$50 (or listed above)	0
	Line 16: In-Kind Contributions \$50 & under (not listed above)	0
	Line 17: TOTAL IN-KIND CONTRIBUTIONS	0

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount

Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	0
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Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

GREENFIELD, MASS.

14 JUN -3 AM 10:39

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 9/29/14 Ending Date: 5/27/14

Type of Report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Isaac Mass' Associates Friends and Neighbors
Candidate Full Name (if applicable)
Councilor - AT Large
Office Sought and District
50 Linden Ave Gfld
Residential Address
Telephone Number (optional): 413-768-8500

Isaac Mass' Associates Friends and Neighbors
Committee Name
Ed Fleming
Name of Committee Treasurer
50 Linden Ave
Committee Mailing Address
Telephone Number (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>1400.89</u>
Line 2: Total receipts this period (page 2, line 11)	<u>5301.54</u>
Line 3: Subtotal (line 1 plus line 2)	<u>6702.43</u>
Line 4: Total expenditures this period (page 3, line 14)	<u>3656.52</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>3045.91</u>
Line 6: Total in-kind contributions this period (page 4)	<u>191.25</u>
Line 7: Total (all) outstanding liabilities (page 4)	<u>1,000.00</u>
Line 8: Name of bank(s) used:	<u>Greenfield Savings Bank</u>

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: EM Fleming (Treasurer's signature) Date: 6/2/14

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: N Mass (Candidate's signature) Date: 6/2/14

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
4/3/14	Sandra Riggeri 54 School St. Greenfield	150 ⁰⁰	
4/2/14	Tony McGee	500 ⁰⁰	
4/3/14	Daniel Lucy 11 Crescent St Greenfield	100 ⁰⁰	
4/3/14	Timothy Farrell 620 Bernardston Rd Gfld	100 ⁰⁰	
4/3/14	Mary Anne Duda	100 ⁰⁰	
4/3/14	WANDA MUZYKA - PYFROM 4 Bowles St Gfld	100 ⁰⁰	
4/3/14	Phyllis DeSanty 85 Munson St. Gfld	200 ⁰⁰	Retired Com cast
4/3/14	Cameron Ward 221 Conway St Gfld	100 ⁰⁰	owner Camalot cleaners
4/3/14	William MARTIN 125 Old Albany Rd	200 ⁰⁰	mayor Greenfield
4/3/14	Robert Cohn	150 ⁰⁰	
4/6/14	William Blanker 42 Meadow Wood Dr	200 ⁰⁰	Retired Esleck Paper
5/24/14	John Hassett	100 ⁰⁰	
5/23/14	Michael F. Ruggieri WINTER MA	100 ⁰⁰	
Line 9: Total Receipts over \$50 (or listed above)		2100	
Line 10: Total Receipts \$50 and under* (not listed above)		3,201.54	
Line 11: TOTAL RECEIPTS IN THE PERIOD		5301.54	← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/5/14	PS Print	2861 Mandela Pkwy Oakland, CA 94608	door hangers	235.69
4/5/14	signs on the cheap.com	11525A Stonehollow Dr. Suite 100, Austin TX 78758	Lawn Signs	913.03
5/16/14	WHA1	Woodard Rd Greenfield MA	Ads	1125.00
5/12/14	WHA1	Woodard Rd Greenfield MA	Ads	200.00
5/16/14	W122	Woodard Rd Greenfield	Ads	260.00
5/16/14	Recorder	Hope St Greenfield	Ads	922.80
Line 12: Total Expenditures over \$50 (or listed above)				3656.52
Line 13: Total Expenditures \$50 and under* (not listed above)				0
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				3656.52

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
4/2/14	Ann Harrington	Pratt Rd Erring MA	Refreshments	136.25
5/23/14	ISAAC MASS	50 Linden Ave	Refreshments	55.00
* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.				Line 15: In-Kind Contributions over \$50 (or listed above) 191.25
Enter on page 1, line 6 →				Line 16: In-Kind Contributions \$50 & under (not listed above) 0
Line 17: TOTAL IN-KIND CONTRIBUTIONS				191.25

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
1/15/14	ISAAC MASS	50 Linden Ave	LOAN	1,000.00
Enter on page 1, line 7 →				Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) 1000.00



Commonwealth
of Massachusetts

GREENFIELD, MASS

14 JUN -3 AM 8:58

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

4/30/14

Ending Date:

6/2/14

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

Christopher Miller

Candidate Full Name (if applicable)

Town Council Precinct 6

Office Sought and District

175 Chapman St.

Residential Address

0305

Telephone Number (optional):

413-522-7320

Committee To Elect Chris Miller

Committee Name

Aaron Sawyer

Name of Committee Treasurer

23 Norwood St.

Committee Mailing Address

Telephone Number (optional):

413-522-7320

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 2, line 11)

267

Line 3: Subtotal (line 1 plus line 2)

267

Line 4: Total expenditures this period (page 3, line 14)

Line 5: Ending Balance (line 3 minus line 4)

267

Line 6: Total in-kind contributions this period (page 4)

396

Line 7: Total (all) outstanding liabilities (page 4)

Line 8: Name of bank(s) used:

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

[Signature]

(Treasurer's signature)

Date:

6/2/14

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Christopher Miller

(Candidate's signature)

Date:

6/2/14

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
5/21/14	Virginia Desorgher 43 Silver Crest Lane Greenfield, MA 01301	\$50.00	
5/21/14		20.00	
		25.00	
		20.00	
		2.00	
		10.00	
		10.00	
		20.00	
		25.00	
		20.00	
	Gail	35.00	
		30.00	
Line 9: Total Receipts over \$50 (or listed above)		267.00	
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		267.00	← Enter on page 1, line 2

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
5/21	Gail Miller	23 Norwood St. Greenfield, MA	Food	\$107
5/21	Chris Miller	175 Chapman St. Greenfield, MA	Signs	\$289
		Knights of Columbus Life Insurance Agent		

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Line 15: In-Kind Contributions over \$50 (or listed above)	396
Line 16: In-Kind Contributions \$50 & under (not listed above)	
Line 17: TOTAL IN-KIND CONTRIBUTIONS	396

Enter on page 1, line 6 →

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	0
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